



P.O. Box 5220
Oswego, NY 13126
315.350.1726
www.movealonginc.org

Volunteer Registration Form

IMPORTANT: You are requested to fill out this form completely and after signing return it to the attention of Jeff Wright prior to donating your time to Move Along Inc. Any questions please feel free to call 315-263-1705 or email at Jeff_Wright@movealonginc.org

Volunteer Name: _____

Gender: _____ Age: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

How did you hear about Move Along? _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

Any pre-existing conditions? _____

Please help us find the perfect fit for you

Volunteer Strengths / Choice(s): (i.e. event planning, sled hockey, basketball etc)						

Please list resources you may have that could be beneficial to Move Along:						

Certification(s) (Please let us know about your pertinent certifications)						

Availability: (Please let us know what hours you can be available)						
Mon	Tue	Wed	Thurs	Fri	Sat	Sun
_____	_____	_____	_____	_____	_____	_____
Hours/week:		Special Notes				
_____		_____				

Date: _____ Signature: _____